PART B - FEE(S) TRANSMITTAL

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MCDONNELL BOEHNEN HULBERT & BERGHOFF LLP 300 S. WACKER DRIVE 32ND FLOOR				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
CHICAGO, IL 60606 08/02/2006 SFELEKE2 00000040 10500813				A. Blair Hughes		(Depositor's name)
08/02/2006 SFELEREE VV 01 FC:1501		C. OCloyer		(Signature)		
02 FC:1504	1400.00 OP 300.00 OP			<u>July 27, 2</u>	006	(Date)
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/500,813 TITLE OF INVENTION: M			Brett Robert Lowe			
APPLN. TYPE	SMALL ENTITY	, ISSUE F		IBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional NO		\$1400)	\$300	\$1700	09/05/2006
EXAMINER JOHNSON, STEPHEN		ART UNIT		ASS-SUBCLASS	J	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has b recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents. If mo name is listed, no name will be printed. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents or						t & Berghoff LLE
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Please check the appropriate	assignee category or category	ries (will not be pr	inted on the patent):	☐ Individual 💆 C	orporation or other private gr	oup entity
4a. The following fee(s) are		b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-2490 (enclose an extra copy of this form).				
a. Applicant claims Si	(from status indicated above MALL ENTITY status. See 3	37 CFR 1.27.			LL ENTITY status. See 37 C	
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Authorized Signature BUM			-	Date	uly 27, 2006	
	A. Blair Hughes				Jo32,901	
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